Please type a plus sign (+) inside this box -PTO/SB/21 (08-00) Approved for use through 10/31/2002. OMB 0651-0031 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE er the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** TRANSMITTAL **Filing Date FORM First Named Inventor** (to be used for all correspondence after initial filing) Group Art Unit **Examiner Name** Total Number of Pages in This Submission Attorney Docket Number **ENCLOSURES** (check all that apply) After Allowance Communication Assignment Papers (for an Application) Fee Transmittal Form to Group Appeal Communication to Board Fee Attached Drawing(s) of Appeals and Interferences Licensing-related Papers Appeal Communication to Group Amendment / Reply (Appeal Notice, Brief, Reply Brief) Petition After Final **Proprietary Information** Petition to Convert to a Affidavits/declaration(s) **Provisional Application** Status Letter Power of Attorney, Revocation Change of Correspondence Other Enclosure(s) (please Extension of Time Request Address identify below): **Terminal Disclaimer Express Abandonment Request** Request for Refund Information Disclosure Statement CD, Number of CD(s) __ Certified Copy of Priority The Extension of Time Fee was Document(s) Remarks paid on-line previously, so is not Response to Missing Parts/ Incomplete Application andosed here

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Mark Pohl, Esq., USPTO Reg. No. 35,325 Firm Pharmaceutical Patent Attorneys, LLC Individual name 55 Madison Avenue, 4th floor, Morristown NJ 07960-7397 USA Signature Date see below date

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